

**COUNTY OF SAN DIEGO
VOLUNTEER REPORT FORM
PERIOD: JULY 1, 2003 - JUNE 30, 2004**

COUNTY OF SAN DIEGO
 BOARD OF SUPERVISORS
 2004 JUL 21 PM 3:19
 THOMAS J PASTUSZKA
 CLERK OF THE BOARD
 OF SUPERVISORS

1. DEPARTMENT/COURT INFORMATION:

Department/Court: TREASURER-TAX COLLECTOR

Division/Unit: ADMINISTRATION & SUPPORT

2. VOLUNTEER PROGRAM BENEFITS:

- a. GENERAL VOLUNTEERS (this section should include community volunteer, student intern, groups, corporations, etc.)

No. Vol.	1	Hours	0	X	\$17.19	=	\$0.00
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Types of work performed by GENERAL VOLUNTEERS in this category:

Legal research and clerical work (law school student).

- b. INSTITUTIONAL VOLUNTEERS (this section should include court referrals, honor camp inmates, PIC/RETC, GAIN, etc.)

No. Vol.	0	Hours	0	X	\$17.19	=	\$0.00
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Types of work performed by INSTITUTIONAL VOLUNTEERS in this category:

N/A

- c. SPECIALIZED VOLUNTEERS (this section should include utilization of Special Volunteers in positions requiring specific skills and/or expertise levels, for example, an attorney, physician, sports figure or celebrity). These specialized positions have verifiable compensation levels [VCL]. If you have such a volunteer, please indicate the position, hours and compensation level below.)

<u>Position</u>	<u>Hours</u>	<u>X</u>	<u>VCL</u>	<u>=</u>	<u>Dollar Benefit</u>
<u>N/A</u>					<u>\$0.00</u>
					<u>\$0.00</u>

No. Vol.	0	Total Hours	0	Total Value	\$0.00
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Types of work performed by SPECIALIZED VOLUNTEERS in this category:

N/A

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

<u>No. of Volunteers</u>	<u>Hours</u>	<u>Dollar Benefit</u>
<u>1</u>	<u>280</u>	<u>\$4,413</u>
<u>0</u>	<u>0</u>	<u>\$0</u>
<u>0</u>	<u>0</u>	<u>\$0</u>

TOTALS:	1	Total Hours	280	Total Value	\$4,412.80
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3. DONATIONS TO VOLUNTEER PROGRAM:

Please list all donations to the department's Volunteer Program including monetary donations and tangible/intangible items. Items such as computers, air time, transportation, books, etc. Please assign a fair market value to each and add to the total value of the donations section.

Item Donated: N/A Value:

Item Donated: Value:

Item Donated: Value:

Item Donated: Value:

TOTAL VALUE = \$0.00

4. VOLUNTEER PROGRAM COSTS:

a.

Cost of direct supervision of Volunteers (total hours of direct supervision multiplied by the hourly rate of staff person[s] directly supervising program volunteers.)

Hours 42 X Rate \$49.22

\$2,864.54

Hours 14 X Rate 56.95

b. Cost of program coordination (total hours of program coordination multiplied the hourly rate of coordinator[s]). This section should include coordination of staff, compiling statistics, job description preparation, volunteer placement, recognition, etc.)

Hours 0 X Rate \$0.00

\$0.00

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c. Other program costs (training materials/supplies, recognition costs, etc.):

Item : _____ N/A _____ Cost: _____

Item : _____ Cost: _____

Item : _____ Cost: _____

TOTAL OF OTHER PROGRAM COSTS =

\$0.00

d. TOTAL OF PROGRAM COST (4a+4b+4c) =

\$2,864.54

5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

a Total Dollar Benefits of Volunteers, Item 2d **\$4,412.80**

b. Total of Donations to Volunteer Program, Item 3 **\$0.00**

c. Subtract Total of program Costs, Item 4d **\$2,864.54**

TOTAL PROGRAM BENEFIT:

\$1,548.26

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6. **RECRUITING:**

Please describe your recruiting programs:

The office of the Treasurer-Tax Collector does not have a formal Volunteer Recruiting program. However, volunteers are recruited in accordance with the office's formal Recruiting and Hiring Policy.

7. **SPECIAL VOLUNTEER PROGRAM ACTIVITIES/ACHIEVEMENTS:**

Please describe any special activities and/or achievements your program was involved in during the period of this report:

The volunteer assisted with legal research related to the recent adoption of the Tax Collection Service Fee ordinance, research related to retirement and general Tax Collector responsibilities.

8. **VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2004-05:**

Please describe your program goals. Include activities, number of volunteers, recruitment, training, recognition and other goals:

N/A

9. **GENERAL INFORMATION:**

Name of person completing report:

Ebony Shelton

Phone:

619-531-4764

Mail Stop: A-49

E-Mail: Ebony.Shelton@sdcounty.ca

Volunteer Coordinator:

N/A

Phone:

Mail Stop:

E-Mail:

10. **DEPARTMENT CERTIFICATION:**


DEPARTMENT HEAD SIGNATURE

7/19/04
DATE

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